	PLEASE TYPE OR PRINT	Entered previ	ous May Show
	₩ Ms	⋈ yes	□ no
	Mr. Artist Patricia	L. Magee	
	Mr. Artist Patricia Permanent Address Street OH, 44286 Tel. (26) Zip Area Code	r Road	(Last Name Last) Richfield
(Street OH 44286 Tel. (216)	659-327	City ()
	Zip Area Code		
1	Temporary or Studio Address		
	Street		
	Tel. ()		
	Zip Area Code		
	If you do not presently live in one of the counties of the		
	Western Reserve, which county were you born in?		
	Collaborator		
	(If Any) If May Show entries are not accepted or not sold: ☑ Artist will pick up at Museum. ☐ Museum should dispose of. ☐ Museum should ship to artist C.O.D. at this address:		
Consider Instances			
Special Instructions			

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

Patricia L. Mogre

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until May 30, 1982.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature Tatricia Z. Magee

> DO NOT DETACH